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#### **About RPM Plus**

The Rational Pharmaceutical Management Plus (RPM Plus) Program, funded by the U.S. Agency for International Development (cooperative agreement HRN-A-00-00-00016-00), works in more than 20 developing countries to provide technical assistance to strengthen drug and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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Follow up RPM Plus Activities, Cote D'Ivoire: Trip Report

## **Acronyms**

ART anti-retroviral treatment

ARV anti-retroviral

CDC U.S. Center for Disease Control and Prevention

CHR regional hospital center

CI Côte d'Ivoire
CSU urban health center
DM drug management
DS health district

EGPAF Elizabeth Glaser Pediatric AIDS Foundation

GCI Government of Côte d'Ivoire

HG general hospital

HIV/AIDS human immunodeficiency virus/acquired immune deficiency syndrome

MOH Ministry of Health

MSH Management Sciences for Health

PEPFAR Presidential Emergency Plan For AIDS Relief

PLWA person living with AIDS

PMTCT prevention of mother to child transmission (HIV)

PNPEC HIV/AIDS national program

PSP-CI Public Health Pharmacy - Central Medical Store

RETRO-CI Retrovirus project – Côte d'Ivoire

RPM Plus Rational Pharmaceutical Management Plus (program)
USAID United States Agency for International Development

TOT Training of Trainers USG US Government

VCT voluntary counseling and testing

Follow up RPM Plus Activities, Cote D'Ivoire: Trip Report

## **Background**

Following the workshop held in Aboisso in May 2004 to present the findings of the assessment of the pharmaceutical sector conducted by the Rational Pharmaceutical Management Program (RPM Plus) in October 2003, the "Pharmacie de Santé Publique de Côte d'Ivoire" (PSP-CI) received technical assistance from RPM Plus for finalizing a three-year workplan taking in reference to the recommendations of the workshop. The workplan centers on \_\_\_\_ essential components for the consolidation and expansion of the Presidential Emergency Plan for AIDS Relief (PEPFAR) whilst strengthening PSP capabilities to support the implementation of the PEPFAR and improve drug management operations in general. In response to the gaps identified by the assessment, one of the immediate interventions was the reinforcement of knowledge of pharmacists and drug managers at district and institutional pharmacies for applying and promoting best practices in drug management operations, especially ARVs and HIV/AIDS related commodities.

RPM Plus quickly focused on human capacity development by providing technical assistance to PSP-CI for creating a national team of trainers in drug management to cover needs in training nationwide. A training of trainers (TOT) workshop conducted in October 2004 ended with a core of 15 trainers built on PSP's human resources as well as pharmacists from different level of health facilities and district pharmacies. The team was immediately assigned the task to make an inventory of the existing training materials in CI and organize these materials in a curriculum according to the principles of the adult learning techniques (Andragogy) and the experiential cycle developed during the TOT. Numerous difficulties merged due to the lack of experience of the team and some conflict schedules with their regular activities. Jana Ntumba, Director of the TOT in October provided orientation and guidance to the group of Abidjan, which submitted to RPM Plus Washington a first draft as they were making progress.

A formal workshop was conducted in Aboisso again from February 18 to 26 with all 15 trainers divided in different groups working on each of the modules identified. Notwithstanding hard work and enthusiasm, the quality of the materials produced requested a new investment in time and attention. Michael Derosena traveled from May 8 to 19 to assist the Abidjan group in the improvement and consolidation of the materials and discuss progress on other areas of priority for PSP-CI as well as for RPM Plus and CDC in the light of the PEPFAR activity expansion and implementation.

## **Purpose of Trip**

The purpose of this trip was:

- 1. To review the draft of the drug management curriculum with the PSP-CI Abidjan team and prepare steps for testing the materials with a first group of pharmacists and drug managers;
- 2. To assist PSP-CI in activities in preparation of the installation of the drug management software ORION;
- 3. To initiate steps for hiring a resident advisor for RPM Plus in CI

4.	To work with PSP-CI on other issues related to drug management, especially ARV management and other HIV/AIDS related commodities.					

## **Activities**

To review the draft of the drug management curriculum with the Abidjan team and prepare steps for testing the materials with a first group of pharmacists

The drug management curriculum is composed of 5 modules broken down in 16 sessions. Initially, the plan was that each group of trainers works separately at a specific time to review every component of the materials for consistency. The absence of the regional trainers was compensated by additional time provided by the Abidjan team. Two new sessions were included in the new material: Selection of drugs, and the National Pharmaceutical Policy. A copy of the Policy document, not familiar even to the trainers, was retrieved at the "Direction de la Pharmacie et Medicaments" and will be used/included in the training materials. Dr. Yapi Faustin assisted in the revision of the Supervision module, and the Financial Management. Dr. Gbane and Dr. Blandine were present for reviewing the module on Procurement and the related sessions. He was joined later by Dr. Attoli and Dr. Attia. The module on Distribution and Utilization was consolidated by Dr. Tia and Dr. Djadji, with special attention for the ARV management. All teams were RPM Plus and PSP-CI used the secretarial services of Ahingora Mireille who organized the documentation as they were submitted after correction. Plans are to conduct the first training session in mid July at San Pedro with approximately 20 participants. A provisional list is shown in annex 2.

To assist PSP in activities in preparation of the installation of the drug management software ORION

A RPM Plus team of two traveled to CI from March to 26 to investigate the technical capacity of PSP-CI to receive the software ORION@MSH that is being provided by MSH following the recommendations of the assessment conducted in 2003, and as a result of the limitations of the current software in use at PSP-CI. Among recommendations made by the team were the identification/hiring of a person contact for support during the implementation process, training, and maintenance of ORION. Two resumes were communicated to RPM Plus for advice. Sidibe Mohamed Hassane was selected jointly by PSP-CI and RPM Plus, and scheduled for work on or about May 23.

RPM Plus also clarified with Dr. Souaré, PSP-CI's Director, the different roles and responsibilities in the use of each ORION's module and sub-components of the modules. PSP-CI requested the installation and development of the following modules:

- 1. Tender and Procurement;
- 2. Inventory management;
- 3. Sales and Distribution;
- 4. Warehouse:
- 5. Vehicles and Equipment;
- 6. Financial Assets.

Each module will be under the responsibility of a main person for coordination of tasks requested in the application of the modules. All tasks are routine parts of drug management operations. The following table details each team in respect of the different modules.

#	Modules	Primary Responsible	Team	
1	Tender and Procurement	Dr. Eric Coulibaly Dr. E. Coulibaly		
			Dr. Abou Coulibaly	
			Mr. Kalou Clovis	
			Mrs. De Bato Elise	
			Mrs.Bro	
			Mr. Ahua	
2	Inventory Management	Dr. Gbané	Dr. Gbané	
			Dr. Amichia	
			Dr. Eric Coulibaly	
			Dr. Larougnon	
			Mr. Silué	
			Dr. Yoffoua	
			Dr. Duncan	
			Dr. Akomian	
3	Sales and Distribution	Dr. Attia	Dr. Attia	
			Dr. Mensa	
			Dr. Yoffoua	
			Dr. Ahua	
4	Warehouse	Dr. Amichia	Dr. Amichia	
			Dr. Lorougnon	
			Mrs. Bro	
			Dr. Attia	
			Dr. A. Coulibaly	
			Dr. Gbané	
			Dr. Yoffoua	
5	Vehicles and Equipment	Mrs. Adjoussou	Drivers	
6	Accounting	-	-	

This table shows interrelations between potential users with regard to the different tasks required for each module, and the complexity of the current organizational structure of PSP-CI. It is likely that the implementation of ORION will call for a reorganization/redistribution of human resources based on a better understanding of roles and responsibilities for practicality and more efficiency in the use of the software.

Regarding resources in equipment, especially computers and accessories, recommendations from the ORION team were that PSP-CI needs to improve the capacity of computers currently in use. It was confirmed by Dr. Souare that six new computers are available for ORION, according to the specifications provided by the team during their visit. PSP-CI also has initiated the preparation of logistics for the installation and the training of appropriate users. MSH is finalizing a memorandum of understanding to be signed by both PSP-CI and MSH for the use of ORION.

To initiate steps for hiring a resident advisor for RPM Plus in CI

With the development of PEPFAR activities, the extension of HIV/AIDS services to additional accredited centers, and the large demand on PSP-CI for availability of ARV products, technical assistance to be provided by RPM Plus requests a closer and constant presence with PSP-CI. RPM Plus had initiated the process to recruit a Senior Program Associate as resident advisor in Cote d'Ivoire (terms of reference in annex). Following two requests for candidature placed on a local newspaper, a total of 32 resumes were sent to RPM Plus, some through PSP-CI directly, others via internet as requested by the RPM Plus Human Resources section. Copies of resumes received via internet were sent to PSP-CI, CDC and USAID (USG) for input. PSP-CI and RPM Plus will agree with the USG team on pre-selected candidates to be interviewed.

To work with PSP-CI on other issues related to drug management, especially ARV management and other HIV/AIDS related commodities.

Beside the training component, RPM Plus has been working with PSP-CI on different other areas aimed at improving drug management operations. During this visit, RPM Plus witnessed a serious crisis affecting most the ARVs. Since the government has made ART services more accessible by lowering and flattering fees to CFA 5,000 by quarter, the ART centers were put under pressure to which they responded in accelerating the rhythm of recruitment of new patients. Also, the number of accredited centers jumped from 8 to 24. As result, the PSP-CI last procurement of ARVs was not able to cover needs of patients. Products that experienced shortages were:

- Efavirenz 200 mg and 600mg;
- Indinavir 400mg;
- Nelfinavir 250 mg;
- Abacavir 300 mg;
- Lopinavir/Ritonavir 133/33 mg;
- Ritonavir 100 mg.

Some products were out of stock for more than two months. An aggravating cause is also the large number of combinations used by clinicians in prescribing regimen: 72 were identified. The MOH and donors involved in HIV/AIDS activities have planned to meet soon with the service providers to discuss this issue of regimen. The following table shows the potential number of accredited centers and the number of centers currently providing ART services<sup>1</sup>:

ZONES	N°	Accredited ART Centers	O = Operational NO = Not operational yet
ABIDJAN 1 PPH Cocody		PPH Cocody	0
2 SMIT		SMIT	0
3 Pédiatrie Yopougon		Pédiatrie Yopougon	0
4 USAC		USAC	0
	5	CAT Adjamé	0

<sup>&</sup>lt;sup>1</sup> Source: Patrice Kacou – PSP-CI

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ZONES	N°	Accredited ART Centers	O = Operational NO = Not operational yet
	6	CNTS	0
	7	Hopital Militaire d'Abidjan	0
	8	ONUSIDA	NO
	9	CIE (S/C SMIT)	0
	10	CIRBA	0
	11	FSTI	NO
	12	PAC-CI	NO
	13	CEPREF Yopougon	0
	14	Hôpital Général Port-Bouet	NO
	15	Projet Fonds Mondial	0
	16	DSSA	NO
	17	CARE International – ONG	NO
	1	District sanitaire Abengourou	0
	2	Centre des sœurs Dorothée Alépé	NO
	3	Hôpital general de Bonoua	NO
	4	District sanitaire de Bonoua	NO
	5	MSF Belgique Man	0
	6	CHR Aboisso	0
	7	District sanitaire Aboisso	NO
	8	CHR Bondoukou	0
	9	CHR Bouaké	0
	10	CHR Daloa	0
	11	District sanitaire Daloa	NO
REGION	12	District sanitaire Divo	NO
REGION	13	CHR Divo	0
	14	CSU Mission catholique Ouangolodougou	0
	15	District sanitaire Gagnoa	NO
	16	CHR Gagnoa	NO
	17	CHR Guiglo	NO
	18	CHR Korhogo	0
	19	CHR Man	0
	20	Odienné	0
	21	CHR San Pédro	NO
	22	District sanitaire San Pédro	NO
	23	CHR Yamoussoukro	0
	24	District sanitaire Yamoussoukro	NO

## **Tracking ARVs**

Availability of data on consumption and use is critical for procurement planning and follow up of HIV/AIDS case management with regard to the national standard treatment guidelines. PSP-CI has been struggling for establish8ing a system aimed at tracking drugs delivered to accredited centers. PSP-CI emphasized on the search of sophisticated software allowing program directors

to capture not only data on drugs delivered, but also patient information on treatment, lab exams, and availability of drugs in all and each center in real time.

RPM Plus has suggested a phased approach by starting to use a non complicated tool capable to produce delivery and consumption reports on ARV and basic client information on drugs and regimen used. PSP-CI has been exposed to the drug management tool "S.I.M.P.L.E" developed by MSH. Plan was that the tool is tested in one or two facilities for possible adjustments to the Cote d'Ivoire context, and later on, extended to other facilities according to needs, as the HIV/AIDS services are extended to newly accredited centers. The consultants hired by PSP-CI to implement the tool at the accredited center USAC opted to integrate data from SIMPLE into their own software. For the time being, it is not clear if the software will be given free to PSP-CI or the Information Planning and Evaluation Division (DIPE) of the MOH that provided the questionnaire to be filled for the patient record part.

In agreement with Dr. Souare, PSP-CI is the process of recruiting an information specialist with computer skills, whose the first assignment is to install the SIMPLE at the CAT center, CHU Yopougon, PPD Cocody, and HMA, and ensure follow up with the users. In the meantime, the consultants may continue to improve the other software.

At facility level, RPM Plus will also focus on the development of a quantification tool to be used by pharmacists and managers to estimate their needs. In fact, one of the main causes of stock outs at PSP-CI is the incapacity of the centers to provide accurate data on needs and forecasting based on plans for scaling up ARV service expansion. It is also anticipated that RPM Plus will assist PSP-CI at a quantification exercise using the MSH software "Quantimed". Preliminary data have been collected during this visit for analysis in Washington and testing with Quantimed.

#### **Collaborators**

CDC-RETROCI USAID PSP-CI EGPAF

## **Next Steps**

- Editing the drug management curriculum;
- Procuring materials and preparing logistics for the first training workshop tentatively scheduled for mid July at San Pedro;
- Preparing PSP-CI for the installation of the MSH drug management software ORION, to be conducted in collaboration with the MSH/SEAM project.
- Installing/implementing SIMPLE at the selected centers and follow up as needed.

### Conclusions and recommendations

This is a critical time for PSP-CI to initiate the process of organizing the drug management information system, and using information for decision-making. The long period of shortage is a result of the absence of accurate data at facility level as well as at PSP-CI itself. RPM Plus has provided to the ARV manager a sample of chart to be used for the flow of information and identifying human resources needed for management of information. Another issue is the obligation for all ART centers to follow the standard national guidelines and the recommended regimen for HIV/AIDS case management. Parallel to the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) initiative, it is appropriate to have a memorandum of understanding (MOU) with the accredited centers emphasizing on the respect of criteria to receive accreditation or to keep their status of ART accredited centers. RPM Plus may assist in the preparation of such document if needed.

# Annex 1. Terms of Reference for the Pharmaceutical Management Associate

#### POSITION DESCRIPTION

Center for Pharmaceutical Management (CPM)
Rational Pharmaceutical Management Plus (RPM Plus) Program

**TITLE:** Senior Technical Advisor, Abidjan, Côte d'Ivoire

**BAND**: 6

**REPORTS TO:** Côte d'Ivoire Team Leader, RPM Plus/Washington

**LOCATION:** Abidjan, Côte d'Ivoire

### **Overall Responsibilities:**

The Senior Program Associate plans and implements RPM Plus activities aimed at strengthening commodity management functions undertaken by PSP-CI (Pharmacie de Santé Publique de Côte d'Ivoire), the Central Medical Stores of Côte d'Ivoire. He/she is the prime liaison between PSP-CI and RPM Plus, ensuring that PSP-CI is fully engaged in the delivery of services that promote the availability and quality of essential drugs, with an emphasis on HIV/AIDS related drugs and commodities.

He/she works closely with the PSP-CI counterparts and interacts with the Ministry of Health (MoH), CDC, and other collaborating agencies and stakeholders, to ensure that all technical assistance activities comply with the national policies and standards and form an integrated part of PSP-CI's operational plans. The main goal in strengthening PSP-CI is to enable the organization to progressively achieve its objectives with an emphasis on the goals of the President's Emergency Plan for AIDS Relief

The Senior Program Associate assists PSP-CI in the development and validation of plans aimed at strengthening the operational capacity of PSP-CI, in particular in the management of HIV/AIDS related drugs and commodities, ensuring maximum participation and full agreement by PSP-CI and, where relevant, other appropriate stakeholders. Also, in close cooperation with the PSP-CI counterparts, the Senior Program Associate establishes effective contacts with the National HIV/AIDS Program to foster an enabling environment for transparent and efficient HIV-AIDS service delivery. The Senior Program Associate is seconded to PSP-CI and is based at their facility in Côte d'Ivoire.

## **Specific Responsibilities:**

- 1. Develop the MSH/RPM Plus action plan in light of the President's Emergency Plan requirements and activities for improving drug management operations at PSP-CI and selected health facilities delivering HIV/AIDS Prevention Mother To Child Transmission (PMTCT) services and Anti-Retroviral Therapy Program (ART) in Côte d'Ivoire.
- 2. Facilitate the implementation of the PSP-CI's action plan and the integration of proposals and contributions agreed upon with RPM Plus.

- 3. Collaborate closely with RPM Plus staff in Washington, DC, and report to the Côte d'Ivoire Team Leader, to ensure that the PSP-CI counterparts utilize their experience and/or expand their capacity to contribute to current and future quantifications based upon their continuous involvement in large scale procurement and supply.
- 4. Coordinate with the appropriate MOH staff, donors, and implementing agencies in order to develop estimates of target patients that need to be covered at each stage of the scale up of the ART in Côte d'Ivoire.
- 5. Analyze the relevant and updated procurement practices at PSP-CI and coordinate with its counterparts to either expand or update the existing Standard Operational Procedures for PSP-CI and peripheral depots. Provide assistance, if required, in the development of transportation plans and delivery schedules to emphasize the flow of commodities between PSP-CI, district pharmacies, health facilities, and/or target PMTCT/ART sites.
- 6. Provide support to PSP-CI in developing clear procedures on the use and cost containment of their management information system (MIS), ensuring timely data entry and reporting in support to inventory control as well as to PSP-CI's managers to assist them in making well informed decisions. Develop methods for regular information sharing with other supply programs.
- 7. Assist in the implementation and development of the commodity management software ORION and arrange the related training for PSP-CI staff with technical support from RPM Plus in Washington, DC.
- Examine and monitor storage conditions at PSP-CI warehouse and, where needed and agreed to with PSP-CI, provide recommendations for necessary upgrades or additions required to enhance optimum storage and security conditions for ART drugs and commodities.
- 9. Participate in regional supervisory visits jointly with PSP-CI counterparts and provide appropriate technical supports to address problems in the field.
- 10. Develop delivery of and participate in commodity management training programs targeted at PSP-CI, district, health centers and target PMTCT/ART sites.
- 11. Develop reports and presentations to be delivered to CDC, stakeholders, and RPM Plus/Washington DC.
- 12. Perform other duties as assigned

#### **Qualifications:**

1. Advanced degree in public health, pharmacy management, or relevant equivalent experience.

- 2. Significant experience in pharmaceutical and commodity management.
- 3. Previous experience in the development and delivery of training programs is preferred.
- 4. Excellent interpersonal skills and demonstrated ability to interact professionally with a diverse staff, clients, and consultants.
- 5. Demonstrated competence in assessing priorities and managing a variety of activities in a time-sensitive environment and meeting deadlines with attention to detail and quality.
- 6. Extensive experience in working with Ministries of Health and other government bodies to contribute to changes in national policies and health programs. Knowledge of the Côte d'Ivoire public health system is desirable.
- 7. Proficiency in French and English required, including reading, writing, and speaking with the ability to conduct business in both languages preferred.
- 8. Demonstrated computer skills in Microsoft Office Suite applications, including Word, Excel, Power Point, and Outlook

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# Annex 2: Provisional list of participants to the training at san Pedro

## **Programme provisoire – Groupe 1**

#	Т	Nom	Prénom	Fonction	Institution
1	Dr	AFFI	Roselyne	Responsable des ARVs	SMIT
2	Dr	DIABY	Daouda	Responsable des ARVs	USAC
3	Dr	ADJA	Marguerite	Pharmacienne Chef	CAT
4	Dr	DOUMATEY	Sylvie	Responsable des ARVs	CIRBA
5	Dr	KOUAKOU	Landry	Responsable des ARVs	Pédiatrie YOP
6	Dr	KAMENAN	Alexis	Responsable des ARVs	PPH Cocody
7	Dr	DAUDIET	Alain	Responsable des ARVs	НМА
8	Dr	OUATTARA	Marius	Responsable des ARVs	HG Port Bouet
9	Dr	KONE	Aminata	Responsable des ARVs	FSU Koumassi
10	Mr	KONAN	Romuald	Responsable des ARVs	CEPREF/Aconda
11	Dr	N'GUESSAN	Hortense	Responsable des ARVs	CHR Daloa
12	Dr	SEKA	Claude Richard	Responsable des ARVs	CHR Divo
13	Dr	BROU	Hervé	Pharmacien Chef	District San Pedro
14	Dr	AMANI	André	Responsable des ARVs	CHU Bouaké
15	Dr	KOFFI	Pierre	Responsable des ARVs	CHR Aboisso
16	Dr	DIAHOU	Jean Claude	Pharmacien Chef	CHR Bondoukou
17	Dr	KACHIRE		Pharmacien Chef	District Yamoussoukro
18	Dr	KONATE	Aramatou	Pharmacienne Chef	CHR Abengourou
19	Dr	TAKI-AMON	Lydie	Responsable des ARVs	HG Abobo Sud
20	Dr	ABO-TCHAOU	Odile	Responsable des ARVs	HG Abobo Nord